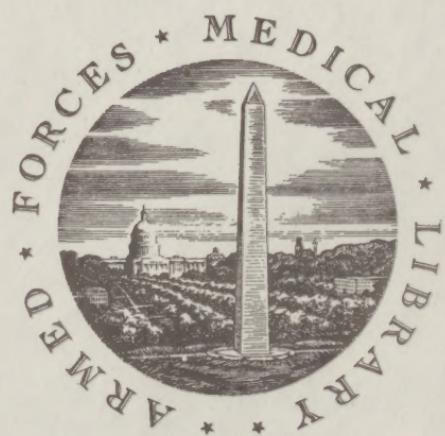


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TEACHING FROM THE CHAIR AND AT THE BEDSIDE.

AN

INTRODUCTORY LECTURE

DELIVERED BEFORE THE

MEDICAL CLASS OF HARVARD UNIVERSITY,

November 6, 1867.

BY OLIVER WENDELL HOLMES,
PARKMAN PROFESSOR OF ANATOMY AND PHYSIOLOGY.

Printed at the request of the Class.

BOSTON :
DAVID CLAPP & SON—334 WASHINGTON STREET.

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H. T. S. A. S.
1867

MEDICAL DEPARTMENT, HARVARD UNIVERSITY,
November 10th, 1867.

O. W. HOLMES, M.D.,

*Parkman Professor of Anatomy and Physiology,
Harvard University.*

DEAR SIR :

The Medical Class have the honor of requesting for publication, a manuscript copy of the Introductory Address delivered by you at the Opening Exercises, November 6th, 1867.

Very respectfully, your ob't serv'ts,

E. N. WHITTIER,

C. P. PUTNAM,

B. B. KENT, Jr.,

Committee for the Class.

164 Charles Street, Nov. 12th, 1867.

GENTLEMEN :

I have much pleasure in placing the manuscript of my Introductory Lecture in your hands for publication, in accordance with the request of the Medical Class.

Very truly your friend,

O. W. HOLMES.

Messrs. E. N. WHITTIER,

C. P. PUTNAM,

B. B. KENT, Jr.,

Committee

NLM

INTRODUCTORY LECTURE.

THE idea is entertained by some of our most sincere professional brethren, that to lengthen and multiply our Winter Lectures will be of necessity to advance the cause of medical education. It is a fair subject for consideration whether they do not overrate the relative importance of that particular mode of instruction which forms the larger part of these courses.

As this School could only lengthen its lecture-term at the expense of its "Summer Session," in which more direct, personal and familiar teaching takes the place of our academic discourses, and in which more time can be given to hospitals, infirmaries, and practical instruction in various important specialties, whatever might be gained, a good deal would certainly be lost in our case by the exchange.

The most essential part of a student's instruction is obtained, as I believe, not in the lecture-room, but at the bedside. Nothing seen there is lost; the rhythms of disease are learned by frequent repetition; its unforeseen occurrences stamp themselves indelibly in the memory. Before the student is

aware of what he has acquired, he has learned the aspects and course and probable issue of the diseases he has seen with his teacher, and the proper mode of dealing with them, so far as his master knows it. On the other hand, our *ex cathedra* prelections have a strong tendency to run into details which, however interesting they may be to ourselves and a few of our more curious listeners, have nothing in them which will ever be of use to the student as a practitioner. It is a perfectly fair question whether I and some other American Professors do not teach quite enough that is useless already. Is it not well to remind the student from time to time that a physician's business is to avert disease, to heal the sick, to prolong life and to diminish suffering? Is it not true that the young man of average ability will find it as much as he can do to fit himself for these simple duties? Is it not best to begin, at any rate, by making sure of such knowledge as he will require in his daily walk, by no means discouraging him from any study for which his genius fits him when he once feels that he has become master of his chosen art.

I know that many branches of science are of the greatest value as feeders of our medical reservoirs. But the practising physician's office is to draw the healing waters, and while he gives his time to this labor he can hardly be expected to explore all the sources that spread themselves over the wide domain of science. The traveller who would not drink of the Nile until he had tracked it to its parent lakes, would be like to die of thirst; and the medical practitioner who would not use the results of many

laborers in other departments without sharing their special toils, would find life far too short and art immeasurably too long.

We owe much to Chemistry, one of the most captivating as well as important of studies; but the medical man must as a general rule content himself with a clear view of its principles and a limited acquaintance with its facts; such especially as are pertinent to his pursuits. I am in little danger of underrating Anatomy or Physiology; but as each of these branches splits up into specialties, any one of which may take up a scientific life-time, I would have them taught with a certain judgment and reserve, so that they shall not crowd the more immediately practical branches. So of all the other ancillary and auxiliary kinds of knowledge, I would have them strictly subordinated to that particular kind of knowledge for which the community looks to its medical advisers.

A medical school is not a scientific school, except just so far as medicine itself is a science. On the natural history side, medicine is a science; on the curative side, chiefly an art. This is implied in Hufeland's aphorism: "The physician must generalize the disease and individualize the patient."

The co-ordinated and classified results of empirical observation, in distinction from scientific experiment, have furnished almost all we know about food, the medicine of health, and medicine, the food of sickness. We eat the root of the *Solanum tuberosum* and throw away its fruit; we eat the fruit of the *Solanum Lycopersicum* and throw away its root.

Nothing but vulgar experience has taught us to reject the potato ball and cook the tomato. So of most of our remedies. The subchloride of mercury, calomel, is the great British] specific; the protochloride of mercury, corrosive sublimate, kills like arsenic, but no chemist could have told us it would be so.

From observations like these we can obtain certain principles from which we can argue deductively to facts of a like nature, but the process is limited, and we are suspicious of all reasoning in that direction applied to the processes of healthy and diseased life. We are continually appealing to special facts. We are willing to give Liebig's artificial milk when we cannot do better, but we watch the child anxiously whose wet-nurse is a chemist's pipkin. A pair of substantial mammary glands has the advantage over the two hemispheres of the most learned Professor's brain, in the art of compounding a nutritious fluid for infants.

The bedside is always the true centre of medical teaching. Certain branches must be taught in the lecture-room, and will necessarily involve a good deal that is not directly useful to the future practitioner. But the over ambitious and active student must not be led away by the seduction of knowledge for its own sake from his principal pursuit. The humble beginner, who is alarmed at the vast fields of knowledge opened to him, may be encouraged by the assurance that with a very slender provision of science, in distinction from practical skill, he may be a useful and acceptable member of the profession to which the health of the community is entrusted.

To those who are not to engage in practice, the various pursuits of science hardly require to be commended. Only they must not be disappointed if they find many subjects treated in our courses as a medical class requires, rather than as a scientific class would expect, that is, with special limitations and constant reference to practical ends. Fortunately they are within easy reach of the highest scientific instruction. The business of a school like this is to make useful working physicians, and to succeed in this it is almost as important not to overcrowd the mind of the pupil with merely curious knowledge as it is to store it with useful information.

In this direction I have written my lecture, not to undervalue any form of scientific labor in its place—an unworthy thought from which I hope I need not defend myself—but to discourage any undue inflation of the scholastic programme, which even now asks more of the student than the teacher is able to obtain from the great majority of those who present themselves for examination. I wish to take a hint in education from the Secretary of the Massachusetts Board of Agriculture, who regards the *cultivation of too much land* as a great defect in our New England farming. I hope that our Medical Institutions may never lay themselves open to the kind of accusation Mr. Lowe brings against the English Universities, when he says that their education is made up “of words that few understand and most will shortly forget; of arts that can never be used, if indeed they can even be learnt; of histories inapplicable to our times; of languages dead and even mouldy; of gram-

matical rules that never had living use and are only *post mortem* examinations ; and of statements faggoted with utter disregard of their comparative value."

This general thought will be kept in view throughout my somewhat discursive address, which will begin with an imaginary clinical lesson from the lips of an historical personage, and close with the portrait from real life of one, who both as teacher and practitioner was long loved and honored among us. If I somewhat over-run my hour, you must pardon me, for I can say with Pascal that I have not had the time to make my lecture shorter.

In the year 1647, that good man John Eliot, commonly called the Apostle Eliot, writing to Mr. Thomas Shepherd, the pious minister of Cambridge, referring to the great need of medical instruction for the Indians, used these words :

" I have thought in my heart that it were a singular good work, if the Lord would stirre up the hearts of some or other of his people in England to give some maintenance toward some Schoole or Collegiate exercise this way, wherein there should be Anatomies and other instructions that way, and where there might be some recompence given to any that should bring in any vegetable or other thing that is vertuous in the way of Physick.

" There is another reason which moves my thought and desires this way, namely that our young students in Physick may be trained up better then they yet bee, who have onely theoreticall knowledge, and are forced to fall to practise before ever they saw an

Anatomy made, or duly trained up in making experiments, for we never had but one Anatomy in the countrey, which Mr. Giles Firman [Firmin] now in England, did make and read upon very well, but no more of that now."

Since the time of the Apostle Eliot the Lord has stirred up the hearts of our people to the building of many Schools and Colleges where medicine is taught in all its branches. Mr. Giles Firmin's "Anatomy" may be considered the first ancestor of a long line of skeletons which have been dangling and rattling in our lecture-rooms for more than a century.

Teaching in New England in 1647 was a grave but simple matter. A single person, combining in many cases, as in that of Mr. Giles Firmin, the offices of physician and preacher, taught what he knew to a few disciples whom he gathered about him. Of the making of that "Anatomy" on which my first predecessor in the branch I teach "did read very well" we can know nothing. The body of some poor wretch who had swung upon the gallows, was probably conveyed by night to some lonely dwelling at the outskirts of the village, and there by the light of flaring torches hastily dissected by hands that trembled over the unwonted task. And ever and anon the master turned to his book, as he laid bare the mysteries of the hidden organs; to his precious Vesalius, it might be, or his figures repeated in the multifarious volume of Ambrose Paré; to the Aldine octavo in which Fallopius recorded his fresh observations; or that giant folio of Spigelius just issued from the press of Amsterdam, in which lovely ladies

display their viscera with a coquettish grace implying that it is rather a pleasure than otherwise to show the lace-like omentum, and hold up their appendices epiploicæ as if they were saying “these are our jewels.”

His teaching of medicine was no doubt chiefly clinical, and received with the same kind of faith as that which accepted his words from the pulpit. His notions of disease were based on what he had observed, seen always in the light of the traditional doctrines in which he was bred. His discourse savored of the weighty doctrines of Hippocrates, diluted by the subtle speculations of Galen, reinforced by the curious comments of the Arab schoolmen as they were conveyed in the mellifluous language of Fernelius, blended, it may be, with something of the lofty mysticism of Van Helmont, and perhaps stealing a flavor of that earlier form of Homœopathy which had lately come to light in Sir Kenelm Digby's “Discourse concerning the Cure of Wounds by the Sympathetic Powder.”

His Pathology was mythology. A malformed foetus, as the readers of Winthrop's Journal may remember, was enough to scare the colonists from their propriety, and suggest the gravest fears of portended disaster. The student of the seventeenth century opened his *Licetus* and saw figures of a lion with the head of a woman, and a man with the head of an elephant. He had offered to his gaze, as born of a human mother, the effigy of a winged cherub, a pterocephalous specimen, which our Professor of Pathological Anatomy would hardly know whether to treat with the reverence due to its celestial aspect,

or to imprison in one of his immortalizing jars of alcohol.

His pharmacopœia consisted mainly of simples, such as the venerable "Herball" of Gerard describes and figures in abounding affluence. St. John's wort and Clown's All-heal, with Spurge and Fennel, Saffron and Parsley, Elder and Snake-root, with opium in some form, and roasted rhubarb and the Four Great Cold Seeds, and the two Resins, of which it used to be said that whatever the Tacamahaca has not cured, the Caramma will, with the more familiar Scammony and Jalap and Black Hellebore, made up a good part of his probable list of remedies. He would have ordered Iron now and then, and possibly an occasional dose of Antimony. He would perhaps have had a rheumatic patient wrapped in the skin of a wolf or a wild cat, and in case of a malignant fever with "purples" or petechiæ, or of an obstinate king's evil, he might have prescribed a certain black powder, which had been made by calcining toads in an earthen pot; a choice remedy, taken internally, or applied to any outward grief.

Except for the toad-powder and the peremptory drastics, one might have borne up against this herb-doctoring as well as against some more modern styles of medication. Barbeyrac and his scholar Sydenham had not yet cleansed the Pharmacopœia of its perilous stuff, but there is no doubt that the more sensible physicians of that day knew well enough that a good honest herb-tea which amused the patient and his nurses was all that was required to carry him through all common disorders.

The student soon learned the physiognomy of disease by going about with his master; fevers, pleurisies, asthmas, dropsies, fluxes, small-pox, sore-throats, measles, consumptions. He saw what was done for them. He put up the medicines, gathered the herbs, and so learned something of *materia medica* and botany. He learned these few things easily and well, for he could give his whole attention to them. Chirurgery was a separate specialty. Women in childbirth were cared for by midwives. There was no chemistry deserving the name to require his study. He did not learn a great deal, perhaps, but what he did learn was his business, namely, how to take care of sick people.

Let me give you a picture of the old fashioned way of instruction, by carrying you with me in imagination in the company of worthy Master Giles Firmin as he makes his round of visits among the good folk of Ipswich, followed by his one student, who shall answer to the scriptural name of Luke. It will not be for entertainment chiefly, but to illustrate the one mode of teaching which can never be superseded, and which, I venture to say, is more important than all the rest put together. The student is a green hand, as you will perceive.

In the first dwelling they come to, a stout fellow is bellowing with colic.

“He will die, Master, of a surety, methinks,” says the timid youth in a whisper.

“Nay, Luke,” the Master answers, “’tis but a dry belly-ache. Dids’t thou not mark that he stayed his roaring when I did press hard over the lesser bowels?

Note that he hath not the pulse of them with fevers, and by what Dorcas telleth me there hath been no long shutting up of the *viæ naturales*. We will steep certain comforting herbs which I will shew thee, and put them in a bag and lay them on his belly. Likewise he shall have my cordial julep with a portion of this confection which we do call *Theriaca Andromachi*, which hath juice of poppy in it, and is a great stayer of anguish. This fellow is at his prayers to-day, but I warrant thee he shall be swearing with the best of them to-morrow."

They jog along the bridle-path on their horses until they come to another lowly dwelling. They sit awhile with a delicate looking girl in whom the ingenuous youth naturally takes a special interest. The good physician talks cheerfully with her, asks her a few questions. Then to her mother: "Good-wife, Margaret hath somewhat profited, as she telleth, by the goat's milk she hath taken night and morning. Do thou pluck a maniple—that is an handful—of the plant called Maidenhair, and make a syrup therewith as I have shewed thee. Let her take a cup full of the same, fasting, before she sleepeth, also before she riseth from her bed." And so they leave the house.

"What thinkest thou, Luke, of the maid we have been visiting?" "She seemeth not much ailing, Master, according to my poor judgment. For she did say she was better. And she had a red cheek and a bright eye, and she spake of being soon able to walk unto the meeting, and did seem greatly hopeful, but spare of flesh, methought, and her voice some-

thing hoarse, as of one that hath a defluxion, with some small coughing from a cold, as she did say. Speak I not truly, Master, that she will be well speedily?"

"Yea, Luke, I do think she shall be well, and mayhap speedily. But it is not here with us she shall be well. For that redness of the cheek is but the sign of the fever which, after the Grecians, we do call the heitical; and that shining of the eyes is but a sickly glazing, and they which do every day get better and likewise thinner and weaker shall find that way leadeth to the church-yard gate. This is the malady which the ancients did call *tabes*, or the wasting disease, and some do name the consumption. A disease whereof most that fall ailing do perish. This Margaret is not long for earth—but she knoweth it not, and still hopeth."

"Why, then, Master, didst thou give her of thy medicine, seeing that her ail is unto death?"

"Thou shalt learn, boy, that they which are sick must have somewhat wherewith to busy their thoughts. There be some who do give these tabid or consumptives a certain posset made with lime-water and anise and liquorice and raisins of the sun, and there be other some who do give the juice of crawfishes boiled in barley-water with chicken-broth, but these be toys, as I do think, and ye shall find as good virtuc, nay better, in this syrup of the simple called Maidenhair."

Something after this manner might Master Giles Firmin have delivered his clinical instructions. Somewhat in this way, a century and a half later, another

New England physician, Dr. Edward Augustus Hol-yoke, taught a young man who came to study with him, a very diligent and intelligent youth, James Jackson by name, the same whose portrait in his advanced years hangs upon this wall, long the honored Professor of Theory and Practice in this Institution, of whom I shall say something in this Lecture. Our venerated Teacher studied assiduously afterwards in the great London Hospitals, but I think he used to quote his "old Master" ten times where he quoted Mr. Cline or Dr. Woodville once.

When I compare this direct transfer of the practical experience of a wise man into the mind of a student—every fact one that he can use in the battle of life and death—with the far off, unserviceable "scientific" truths that I and some others are in the habit of teaching, I cannot help asking myself whether, if we concede that our forefathers taught too little, there is not a possibility that we may sometimes attempt to teach too much. I almost blush when I think of myself as describing the eight several facets on two slender processes of the palate bone, or the seven little twigs that branch off from the minute tympanic nerve, and I wonder whether my excellent colleague feels in the same way when he pictures himself as giving the constitution of neurin, which as he and I know very well is that of the hydrate of trimethyle-oxethyle-ammonium, or the formula for the production of alloxan, which, though none but the Professors and older students can be expected to remember it, is $C_{10} H_4 N_4 O_6 + 2 H_2 O, NO_5 \} = C_8 H_4 N_2 O_{10} + 2 CO_2 + N_2 + NH_4 O, NO_5.$

I can hear the voice of some rough iconoclast addressing the Anatomist and the Chemist in tones of contemptuous indignation : “ What is this stuff with which you are cramming the brains of young men who are to hold the lives of the community in their hands ? Here is a man fallen in a fit ; you can tell me all about the eight surfaces of the two processes of the palate-bone, but you have not had the sense to loosen that man’s neck-cloth, and the old women are all calling you a fool ? Here is a fellow that has just swallowed poison. I want something to turn his stomach inside out at the shortest notice. O, you have forgotten the dose of the sulphate of zinc, but you remember the formula for the production of alloxan ! ”

“ Look you, Master Doctor—if I go to a carpenter to come and stop a leak in my roof that is flooding the house, do you suppose I care whether he is a botanist or not ? Cannot a man work in wood without knowing all about endogens and exogens, or must he attend Professor Gray’s Lectures before he can be trusted to make a box-trap ? If my horse casts a shoe, do you think I will not trust a blacksmith to shoe him until I have made sure that he is sound on the distinction between the sesquioxide and the proto-sesquioxide of iron ? ”

—But my scientific labor is to lead to useful results by and by, in the next generation, or in some possible remote future.—

“ Diavolo ! ” as your Dr. Rabelais has it,—answers the iconoclast—“ what is that to me and my colic, to me and my strangury ? I pay the Captain of the

Cunard steamship to carry me quickly and safely to Liverpool, not to make a chart of the Atlantic for after voyagers! If Professor Pierce undertakes to pilot me into Boston Harbor and runs me on Cohasset rocks, what answer is it to tell me that he is Superintendent of the Coast Survey? No, Sir! I want a plain man in a pea-jacket and a sou'wester, who knows the channel of Boston Harbor, and the rocks of Boston Harbor, and the distinguished Professor is quite of my mind as to the matter, for I took the pains to ask him before I ventured to use his name in the way of illustration."

I do not know how the remarks of the image-breaker may strike others, but I feel that they put me on my defence with regard to much of my teaching. Some years ago I ventured to show in an introductory Lecture how very small a proportion of the anatomical facts taught in a regular course as delivered by myself and others, had any practical bearing whatever on the treatment of disease. How can I, how can any medical teacher justify himself in teaching anything that is not like to be of practical use to a class of young men who are to hold in their hands the balance in which life and death, ease and anguish, happiness and wretchedness are to be daily weighed?

I hope we are not all wrong. Oftentimes in finding how sadly ignorant of really essential and vital facts and rules were some of those whom we had been larding with the choicest scraps of science, I have doubted whether the old one-man system of teaching, when the one man was of the right sort, did not turn out better working physicians than our more elabo-

rate method. The best practitioner I ever knew was mainly shaped to excellence in that way. I can understand perfectly the regrets of my friend Dr. John Brown of Edinburgh, for the good that was lost with the old apprenticeship system. I understand as well Dr. Latham's fear "that many men of the best abilities and good education will be deterred from prosecuting physic as a profession, in consequence of the necessity indiscriminately laid upon all for impossible attainments."

I feel therefore impelled to say a very few words in defence of that system of teaching adopted in our Colleges, by which we wish to supplement and complete the instruction given by private individuals or by what are often called Summer Schools.

The reason why we teach so much that is not practical and in itself useful, is because we find that the easiest way of teaching what *is* practical and useful. If we could in any way eliminate all that would help a man to deal successfully with disease, and teach it by itself so that it should be as tenaciously rooted in the memory, as easily summoned when wanted, as fertile in suggestion of related facts, as satisfactory to the peremptory demands of the intelligence as if taught in its scientific connections, I think it would be our duty so to teach the momentous truths of medicine, and to regard all useless additions as an intrusion on the time which should be otherwise occupied.

But we cannot successfully eliminate and teach by itself that which is purely practical. The easiest and surest way of acquiring facts is to learn them in

groups, in systems, and systematized knowledge is science. You can very often carry two facts fastened together more easily than one by itself, as a housemaid can carry two pails of water with a hoop more easily than one without it. You can remember a man's face, made up of many features, better than you can his nose or his mouth or his eye-brow. Scores of proverbs show you that you can remember two lines that rhyme better than one without the jingle. The ancients, who knew the laws of memory, grouped the seven cities that contended for the honor of being Homer's birth-place in a line thus given by Aulus Gellius :

Smurna, Rodos, Colophon, Salamin, Ios, Argos, Athenai.

I remember, in the earlier political days of Martin Van Buren, that Colonel Stone, of the New York Commercial, or one of his correspondents, said that six towns of New York would claim in the same way to have been the birth-place of the " Little Magician," as he was then called ; and thus he gave their names, any one of which I should long ago have forgotten, but which as a group have stuck tight in my memory from that day to this :

Catskill, Saugerties, Redhook, Kinderhook, Seaghtieoke, Schodac.

If the memory gains so much by mere rhythmical association, how much more will it gain when isolated facts are brought together under laws and principles, when organs are examined in their natural connections, when structure is coupled with function, and healthy and diseased action are studied as they pass one into the other ! Systematic, or scientific study is invaluable as supplying a natural kind of mnemonics, if for

nothing else. You cannot properly learn the facts you want from Anatomy and Chemistry in any way so easily as by taking them in their regular order, with other allied facts, only there must be common sense exercised in leaving out a great deal which belongs to each of the two branches as pure science. The dullest of teachers is the one who does not know what to omit.

The larger aim of scientific training is to furnish you with principles to which you will be able to refer isolated facts, and so bring these within the range of recorded experience. See what the London Times said about the three Germans who cracked open John Bull Chatwood's strong-box at the Fair the other day, while the three Englishmen hammered away in vain at Brother Jonathan Herring's. The Englishmen represented brute force. The Germans had been trained to appreciate principle. The Englishman "knows his business by rote and rule of thumb"—science, which would "teach him to do in an hour what has hitherto occupied him two hours," "is in a manner forbidden to him." To this cause the Times attributes the falling off of English workmen in comparison with those of the Continent.

Granting all this, we must not expect too much from "science" as distinguished from common experience. There are ten thousand experimenters without special apparatus for every one in the laboratory. Accident is the great chemist and toxicologist. Battle is the great vivisector. Hunger has instituted researches on food such as no Liebig, no Academic Commission has ever recorded.

Medicine, sometimes impertinently, often ignorantly, often carelessly called "allopathy," appropriates everything from every source that can be of the slightest use to anybody who is ailing in any way, or like to be ailing from any cause. It learned from a monk how to use antimony, from a Jesuit how to cure agues, from a friar how to cut for stone, from a soldier how to treat gout, from a sailor how to keep off scurvy, from a post-master how to sound the Eustachian tube, from a dairy-maid how to prevent small-pox, and from an old market-woman how to catch the itch-insect. It borrowed acupuncture and the moxa from the Japanese heathen, and was taught the use of lobelia by the American savage. It stands ready to-day to accept anything from any theorist, from any empiric who can make out a good case for his discovery or his remedy. "Science" is one of its benefactors, but only one, out of many. Ask the wisest practising physician you know, what branches of science help him habitually, and what amount of knowledge relating to each branch he requires for his professional duties. He will tell you that scientific training has a value independent of all the special knowledge acquired. He will tell you that many facts are explained by studying them in the wider range of related facts to which they belong. He will gratefully recognize that the anatomist has furnished him with indispensable data, that the physiologist has sometimes put him on the track of new modes of treatment, that the chemist has isolated the active principles of his medicines, has taught him how to combine them, has from time to time offered

him new remedial agencies, and so of others of his allies. But he will also tell you, if I am not mistaken, that his own branch of knowledge is so extensive and so perplexing that he must accept most of his facts ready made at their hands. He will own to you that in the struggle for life which goes on day and night in our thoughts as in the outside world of nature, much that he learned under the name of science has died out, and that simple homely experience has largely taken the place of that scholastic knowledge to which he and perhaps some of his instructors once attached a paramount importance.

This, then, is my view of scientific training as conducted in courses such as you are entering on. Up to a certain point I believe in set Lectures as excellent adjuncts to what is far more important, practical instruction at the bed-side, in the operating room, and under the eye of the Demonstrator. But I am so far from wishing these courses extended, that I think some of them—suppose I say my own—would almost bear curtailing. Do you want me to describe more branches of the sciatic and crural nerves? I can take Fischer's plates, and lecturing on that scale fill up my whole course and not finish the nerves alone. We must stop somewhere, and for my own part I think the scholastic exercises of our colleges have already claimed their full share of the student's time without our seeking to extend them.

I trust I have vindicated the apparent in consequence of teaching young students a good deal that seems at first sight profitless, but which helps them to learn and retain what is profitable. But this is an

inquisitive age, and if we insist on piling up beyond a certain height knowledge which is in itself mere trash and lumber to a man whose life is to be one long fight with death and disease, there will be some sharp questions asked by and by, and our quick-witted people will perhaps find they can get along as well without the professor's cap as without the bishop's mitre and the monarch's crown.

I myself have nothing to do with clinical teaching. Yet I do not hesitate to say it is more essential than all the rest put together, so far as the ordinary practice of medicine is concerned; and this is by far the most important thing to be learned, because it deals with so many more lives than any other branch of the profession. So of personal instruction, such as we give and others give in the interval of lectures, much of it at the bedside, some of it in the laboratory, some in the microscope-room, some in the recitation-room, I think it has many advantages of its own over the winter course, and I do not wish to see it shortened for the sake of prolonging what seems to me long enough already.

If I am jealous of the tendency to expand the time given to the acquisition of curious knowledge, at the expense of the plain old-fashioned bed-side teachings, I only share the feeling which Sydenham expressed two hundred years ago, using an image I have already borrowed. "He would be no honest and successful pilot who was to apply himself with less industry to avoid rocks and sands and bring his vessel safely home, than to search into the causes of the ebbing and flowing of the sea, which,

though very well for a philosopher, is foreign to him whose business it is to secure the ship. So neither will a physician, whose province it is to cure diseases, be able to do so, though he be a person of great genius, who bestows less time on the hidden and intricate method of nature, and adapting his means thereto, than on curious and subtle speculation."

"Medicine is my wife and Science is my mistress," said Dr. Rush. I do not think that the breach of the seventh commandment can be shown to have been of advantage to the legitimate owner of his affections. Read what Dr. Elisha Bartlett says of him as a practitioner, or ask one of our own honored Ex-Professors, who studied under him, whether Dr. Rush had ever learned the meaning of that saying of Lord Bacon that man is the minister and interpreter of Nature, or whether he did not speak habitually of Nature as an intruder in the sick room, from which his art was to expel her as an incompetent and a meddler.

All a man's powers are not too much for such a profession as Medicine. "He is a learned man," said old Parson Emmons of Franklin, "who understands one subject, and he is a very learned man who understands two subjects." Schönbein says he has been studying oxygen for thirty years. Mitscherlich said it took fourteen years to establish a new fact in chemistry. Aubrey says of Harvey, the discoverer of the circulation, that "though all his profession would allow him to be an excellent anatomist, I have never heard of any who admired his therapeutic way." My learned and excellent friend before re-

ferred to, Dr. Brown of Edinburgh, from whose very lively and sensible Essay, "Locke and Sydenham," I have borrowed several of my citations, contrasts Sir Charles Bell, the discoverer, the man of science, with Dr. Abercrombie, the master in the diagnosis and treatment of disease. It is through one of the rarest of combinations that we have in our Faculty a teacher on whom the scientific mantle of Bell has fallen, and who yet stands preëminent in the practical treatment of the class of diseases which his inventive and ardent experimental genius has illustrated. M. Brown-Séquard's example is as eloquent as his teaching in proof of the advantages of well directed scientific investigation. But those who emulate his success at once as a discoverer and a practitioner, must be content like him to limit their field of practice. The highest genius cannot afford in our time to forget the ancient precept, *Divide et impera*.

"I suppose I must go and earn this — guinea," said a medical man who was sent for while he was dissecting an animal. I should not have cared to be his patient. His dissection would do me no good, and his thoughts would be too much upon it. I want a whole man for my doctor, not a half one. I would have sent for a humbler practitioner, who would have given himself entirely to me, and told the other—who was no less a man than John Hunter—to go on and finish the dissection of his tiger.

Sydenham's "Read Don Quixote" should be addressed not to the student, but to the Professor of to-day. Aimed at him it means, "Do not be too learned. Do not think you are going to lecture to

picked young men who are training themselves to be scientific discoverers. They are of fair average capacity, and they are going to be working doctors."

These young men are to have some very serious vital facts to deal with. I will mention a few of them.

Every other resident adult you meet in these streets is or will be more or less tuberculous. This is not an extravagant estimate, as very nearly one-third of the *deaths* of adults in Boston last year were from phthisis.* If the relative number is less in our other northern cities, it is probably in a great measure because they are more unhealthy; that is, they have as much, or nearly as much consumption, but they have more fevers or other fatal diseases.

These heavy-eyed men with the alcoholized brains, these pallid youths with the nicotized optic ganglia and thinking-marrows brown as their own meerschaums,—of whom you meet too many,—will ask all your wisdom to deal with their poisoned nerves and their enfeebled wills.

Nearly seventeen hundred children under five years of age died last year in this city. A poor human article, no doubt, in many cases, still, worth an attempt to save them, especially when we remember the effect of Dr. Clarke's suggestion at the Dublin Hospital, by which some twenty-five or thirty thousand children's lives have probably been saved in a single city.

Again, the complaint is often heard that the native population is not increasing so rapidly as in former generations. The breeding and nursing period of Ameri-

* Total number of deaths, 4379; under 20 years, 2109; over 20 years, 2270. From phthisis, 846; under 20 years, 146; over 20 years, 700.

can women is one of peculiar delicacy and frequent infirmity. Many of them must require a considerable interval between the reproductive efforts, to repair damages and regain strength. This matter is not to be decided by an appeal to unschooled nature. It is the same question as that of the deformed pelvis—one of degree. The facts of mal-vitalization are as much to be attended to as those of mal-formation. If the woman with a twisted pelvis is to be considered an exempt, the woman with a defective organization should be recognized as belonging to the invalid corps. We shudder to hear what is alleged as to the prevalence of criminal practices ; if back of these there can be shown organic incapacity or overtaxing of too limited powers, the facts belong to the province of the practical physician, as well as of the moralist and the legislator, and require his gravest consideration.

Take the important question of bleeding. Is vena-section done with forever ? Six years ago it was said here in an introductory Lecture that it would doubtless come back again sooner or later. A fortnight ago I found myself in the cars with one of the most sensible and esteemed practitioners in New England. He took out his wallet and showed me two lancets, which he carried with him ; he had never given up their use. This is a point you will have to consider.

Or, to mention one out of many questionable remedies, shall you give Veratrum Viride in fevers and inflammations ? It makes the pulse slower in these affections. Then the *presumption* would naturally be that it does harm. The caution with reference to

it on this ground was long ago recorded in the Lecture above referred to. See what Dr. John Hughes Bennett says of it in the recent edition of his work on Medicine. Nothing but the most careful clinical experience can settle this and such points of treatment.

These are all practical questions—questions of life and death, and every day will be full of just such questions. Take the problem of climate. A patient comes to you with asthma and wants to know where he can breathe; another comes to you with phthisis and wants to know where he can live. What boy's play is nine tenths of all that is taught in many a pretentious course of lectures, compared with what an accurate and extensive knowledge of the advantages and disadvantages of different residences in these and other complaints would be to a practising physician! I saw the other day a gentleman living in Canada, who had spent seven successive winters in Egypt, with the entire relief of certain obscure thoracic symptoms which troubled him while at home. I saw, two months ago, another gentleman from Minnesota, an observer and a man of sense, who considered that State as the great *sanatorium* for all pulmonary complaints. If half our grown population are or will be more or less tuberculous, the question of colonizing Florida assumes a new aspect. Even within the borders of our own State, the very interesting researches of Dr. Bowditch show that there is a great variation in the amount of tuberculous disease in different towns, apparently connected with local conditions. The hygienic map of a State is quite as valuable as

its geological map, and it is the business of every practising physician to know it thoroughly. They understand this in England, and send a patient with a dry irritating cough to Torquay or Penzance, while they send another with relaxed bronchial membranes to Clifton or Brighton. Here is another great field for practical study.

So as to the all-important question of diet. "Of all the means of cure at our command," says Dr. Bennett, "a regulation of the quantity and quality of the diet is by far the most powerful." Dr. MacCormac would perhaps except the air we breathe, for he thinks that impure air, especially in sleeping rooms, is the great cause of tubercle. It is sufficiently proved that the American—the New Englander—the Bostonian—can breed strong and sound children, generation after generation—nay, I have shown by the record of a particular family that vital losses may be retrieved, and a feeble race grow to lusty vigor in this very climate and locality. Is not the question why our young men and women so often break down, and how they can be kept from breaking down, far more important for physicians to settle than whether there is one cranial vertebra, or whether there are four, or none?

—But I have a taste for the homologies, I want to go deeply into the subject of embryology, I want to analyze the protonihilates precipitated from pigeon's milk by the action of the lunar spectrum—shall I not follow my star—shall I not obey my instinct—shall I not give myself to the lofty pursuits of science for its own sake?—

Certainly you may, if you like. But take down your sign, or never put it up. That is the way Dr. Owen and Dr. Huxley, Dr. Agassiz and Dr. Jeffries Wyman, Dr. Gray and Dr. Charles T. Jackson settled the difficulty. We all admire the achievements of this band of distinguished doctors who do not practise. But we say of their work and of all pure science, as the French officer said of the charge of the six hundred at Balaclava, "*C'est magnifique, mais ce n'est pas la guerre,*"—it is very splendid, but it is not a practising doctor's business. His patient has a right to the cream of his life and not merely to the thin milk that is left after "science" has skimmed it off. The best a physician can give is never too good for the patient.

It is often a disadvantage to a young practitioner to be known for any accomplishment outside of his profession. Haller lost his election as Physician to the Hospital in his native city of Berne, principally on the ground that he was a poet. In his later years the physician may venture more boldly. Astruc was sixty-nine years old when he published his "Conjectures," the first attempt, we are told, to decide the authorship of the Pentateuch showing anything like a discerning criticism. Sir Benjamin Brodie was seventy years old before he left his physiological and surgical studies to indulge in psychological speculations. The period of pupilage will be busy enough in acquiring the knowledge needed, and the season of active practice will leave little leisure for any but professional studies.

Dr. Graves of Dublin, one of the first clinical

teachers of our time, always insisted on his students' beginning at once to visit the hospital. At the bed-side the student must learn to treat disease, and just as certainly as we spin out and multiply our academic prelections we shall work in more and more stuffing, more and more rubbish, more and more irrelevant, useless detail which the student will get rid of just as soon as he leaves us. Then the next thing will be a new organization, with an examining board of first rate practical men, who will ask the candidate questions that mean business—who will make him operate if he is to be a Surgeon, and try him at the bed-side if he is to be a physician—and not puzzle him with scientific conundrums which not more than one of the questioners could answer himself or ever heard of since he graduated.

Or these women who are hammering at the gates on which is written "No admittance for the mothers of mankind," will by and by organize an institution, which starting from that skilful kind of nursing which Florence Nightingale taught so well, will work backwards through anodynes, palliatives, curatives, preventives, until with little show of science it imparts most of what is most valuable in those branches of the healing art it professes to teach. When that time comes, the fitness of women for certain medical duties, which Hecquet advocated in 1708, which Douglas maintained in 1736, which Dr. John Ware, long the honored Professor of Theory and Practice in this Institution, upheld within our own recollection in the face of his own recorded opinion to the contrary, will very possibly be recognized.

My advice to every teacher less experienced than myself would be, therefore; Do not fret over the details you have to omit; you probably teach altogether too many as it is. Individuals may learn a thing with once hearing it, but the only way of teaching a whole class is by enormous repetition, representation, and illustration in all possible forms. Now and then you will have a young man on your benches like the late Waldo Burnett,—not very often, if you lecture half a century. You cannot pretend to lecture chiefly for men like that,—a Mississippi raft might as well take an ocean-steamer in tow. To meet his wants you would have to leave the rest of your class behind, and that you must not do. President Allen, of Jefferson College, says that his instruction has been successful in proportion as it has been elementary. It may be a humiliating statement, but it is one which I have found true in my own experience.

To the student I would say, that however plain and simple may be our teaching, he must expect to forget much which he follows intelligently in the lecture-room. But it is not the same, as if he had never learned it. A man must *get* a thing before he can *forget* it. There is a great world of ideas we cannot voluntarily recall—they are outside the limits of the will. But they sway our conscious thought as the unseen planets influence the movements of those within the sphere of vision. No man knows how much he knows,—how many ideas he has,—any more than he knows how many blood-globules roll in his veins. Sometimes accident brings back here and there one, but the mind is full of irrevocable remembrances

and unthinkable thoughts, which take a part in all its judgments as indestructible forces. Some of you must feel your scientific deficiencies painfully after your best efforts. But every one can acquire what is most essential. A man of very moderate ability may be a good physician, if he devotes himself faithfully to the work. More than this, a positively dull man, in the ordinary acceptation of the term, sometimes makes a safer practitioner than one who has, we will say, five per cent more brains than his average neighbor, but who thinks it is fifty per cent. Skulls belonging to this last variety of the human race are more common, I may remark, than specimens like the Neanderthal cranium, a cast of which you will find on the table in the Museum.

Whether the average talent be high or low, the Colleges of the land must make the best commodity they can out of such material as the country and the cities furnish them. The community must have Doctors as it must have bread. It uses up its Doctors just as it wears out its shoes, and requires new ones. All the bread need not be French rolls, all the shoes need not be patent leather ones; but the bread must be something that can be eaten, and the shoes must be something that can be worn. Life must somehow find food for the two forces that rub everything to pieces, or burn it to ashes,—friction and oxygen. Doctors are oxydable products, and the schools must keep furnishing new ones as the old ones turn into oxyds; some of first rate quality that burn with a great light,—some of a lower grade of brilliancy,

some honestly, unmistakably, by the grace of God, of moderate gifts, or in simpler phrase, dull.

The public will give every honest and reasonably competent worker in the healing art a hearty welcome. It is on the whole very loyal to the Medical Profession. Three successive years have borne witness to the feeling with which this Institution, representing it in its educational aspect, is regarded by those who are themselves most honored and esteemed. The great Master of Natural Science bade the last year's class farewell in our behalf, in those accents which delight every audience. The Head of our ancient University honored us in the same way in the preceding season. And how can we forget that other occasion when the Chief Magistrate of the Commonwealth, that noble citizen whom we have just lost, large-souled, sweet-natured, always ready for every kind office, came among us at our bidding, and talked to us of our duties in words as full of wisdom as his heart was of goodness?

You have not much to fear, I think, from the fancy practitioners. The vulgar quackeries drop off, atrophied, one after another. Homœopathy has long been encysted, and is carried on the body medical as quietly as an old wen. Every year gives you a more reasoning and reasonable people to deal with. See how it is in Literature. The dynasty of British dogmatists, after lasting a hundred years and more, is on its last legs. Thomas Carlyle, third in the line of descent, finds an audience very different from those which listened to the silver speech of Samuel Taylor Coleridge and the sonorous phrases of Samuel John-

son. We read him, we smile at his clotted English, his "swarmery" and other picturesque expressions, but we lay down his tirade as we do one of Dr. Cumming's interpretations of prophecy, which tells us that the world is coming to an end next week or next month, if the weather permits,—not otherwise,—feeling very sure that the weather will be unfavorable.

It is the same common-sense public you will appeal to. The less pretension you make, the better they will like you in the long run. I hope we shall make everything as plain and as simple to you as we can. I would never use a long word, even, where a short one would answer the purpose. I know there are professors in this country who "ligate" arteries. Other surgeons only tie them, and it stops the bleeding just as well. It is the familiarity and simplicity of bedside instruction which makes it so pleasant as well as so profitable. A good clinical teacher is himself a Medical School. We need not wonder that our young men are beginning to announce themselves not only as graduates of this or that College, but also as pupils of some one distinguished master.

I wish to close this Lecture, if you will allow me a few moments longer, with a brief sketch of an instructor and practitioner whose character was as nearly a model one in both capacities as I can find any where recorded.

Dr. JAMES JACKSON, Professor of the Theory and Practice of Medicine in this University from 1812 to 1836, and whose name has been since retained on our rolls as Professor Emeritus, died on the 27th of

August last, in the ninetieth year of his age. He studied his profession, as I have already mentioned, with Dr. Holyoke of Salem, one of the few physicians who have borne witness to their knowledge of the laws of life by living to complete their hundredth year. I think the student took his Old Master, as he always loved to call him, as his model; each was worthy of the other, and both were bright examples to all who come after them.

I remember that in the sermon preached by Dr. Brazer after Dr. Holyoke's death, one of the points most insisted upon as characteristic of that wise and good old man was the perfect balance of all his faculties. The same harmonious adjustment of powers, the same symmetrical arrangement of life, the same complete fulfilment of every day's duties, without haste and without needless delay, which characterized the master, equally distinguished the scholar. A glance at the life of our own Old Master, if I can do any justice at all to his excellencies, will give you something to carry away from this hour's meeting not unworthy to be remembered.

From December, 1797, to October, 1799, he remained with Dr. Holyoke as a student, a period which he has spoken of as a most interesting and most gratifying part of his life. After this he passed eight months in London, and on his return, in October, 1800, he began business in Boston.

He had followed Mr. Cline, as I have mentioned, and was competent to practise Surgery. But he found Dr. John Collins Warren had already occupied the ground which at that day hardly called for more than

one leading practitioner, and wisely chose the Medical branch of the profession. He had only himself to rely upon, but he had confidence in his prospects, conscious, doubtless, of his own powers, knowing his own industry and determination, and being of an eminently cheerful and hopeful disposition. No better proof of his spirit can be given than that, just a year from the time when he began to practise as a physician, he took that eventful step which in such a man implies that he sees his way clear to a position ; he married a lady blessed with many gifts, but not bringing him a fortune to paralyze his industry.

He had not miscalculated his chances in life. He very soon rose into a good practice, and began the founding of that reputation which grew with his years, until he stood by general consent at the head of his chosen branch of the profession, to say the least, in this city and in all this region of country. His skill and wisdom were the last tribunal to which the sick and suffering could appeal. The community trusted and loved him, the profession recognized him as the noblest type of the physician. The young men whom he had taught wandered through foreign hospitals, where they learned many things that were valuable, and many that were curious ; but as they grew older and began to think more of their ability to help the sick than their power of talking about phenomena, they began to look back to the teaching of Dr. Jackson, as he, after his London experience, looked back to that of Dr. Holyoke. And so it came to be at last that the bare mention of his name in any of our medical assemblies would call forth such a

tribute of affectionate regard as is only yielded to age when it brings with it the record of a life spent in well doing.

No accident ever carries a man to eminence such as his in the medical profession. He who looks for it must want it earnestly and work for it vigorously; Nature must have qualified him in many ways, and education must have equipped him with various knowledge, or his reputation will evaporate before it reaches the noon-day blaze of fame. How did Dr. Jackson gain the position which all conceded to him? In the answer to this question some among you may find a key that shall unlock the gate opening on that fair field of the future of which all dream but which not all will ever reach.

First of all, he truly loved his profession. He had no intellectual ambitions outside of it, literary, scientific or political. To him it was occupation enough to apply at the bed-side the best of all that he knew for the good of his patient; to protect the community against the inroads of pestilence; to teach the young all that he himself had been taught, with all that his own experience had added; to leave on record some of the most important results of his long observation.

With his patients he was so perfect at all points that it is hard to overpraise him. I have seen many noted British and French and American practitioners, but I never saw the man so altogether admirable at the bed-side of the sick as Dr. James Jackson. His smile was itself a remedy better than the potable gold and the dissolved pearls that comforted the praecordia of mediæval monarchs. Did a patient, alarmed with-

out cause, need encouragement, it carried the sunshine of hope into his heart and put all his whims to flight, as David's harp cleared the haunted chamber of the sullen king. Had the hour come, not for encouragement, but for sympathy, his face, his voice, his manner all showed it, because his heart felt it. So gentle was he, so thoughtful, so calm, so absorbed in the case before him, not to turn round and look for a tribute to his sagacity, not to bolster himself in a favorite theory, but to find out all he could, and to weigh gravely and cautiously all that he found, that to follow him in his morning visit was not only to take a lesson in the healing art, it was learning how to learn, how to move, how to look, how to feel, if that can be learned. To visit with Dr. Jackson was a medical education.

He was very firm, with all his kindness. He would have the truth about his patients. The nurses found it out, and the shrewder ones never ventured to tell him any thing but a straight story. A clinical dialogue between Dr. Jackson and Miss Rebecca Taylor, sometime nurse in the Massachusetts General Hospital, a mistress in her calling, was as good questioning and answering as one would be like to hear outside of the court-room.

Of his practice you can form an opinion from his book called "Letters to a Young Physician." Like all sensible men from the days of Hippocrates to the present, he knew that diet and regimen were more important than any drug or than all drugs put together. Witness his treatment of phthisis and of epilepsy. He retained, however, more confidence in

some remedial agents than most of the younger generation would concede to them. Yet his *materia medica* was a simple one.

“When I first went to live with Dr. Holyoke,” he says, “in 1797, showing me his shop, he said, ‘There seems to you to be a great variety of medicines here, and that it will take you long to get acquainted with them, but most of them are unimportant. There are four which are equal to all the rest, namely, Mercury, Antimony, Bark and Opium.’” And Dr. Jackson adds, “I can only say of his practice, the longer I have lived, I have thought better and better of it.” When he thought it necessary to give medicine, he gave it in earnest. He hated half-practice—giving a little of this or that, so as to be able to say that one had done something, in case a consultation was held, or a still more ominous event occurred. He would give opium, for instance, as boldly as the late Dr. Fisher of Beverly, but he followed the aphorism of the Father of Medicine, and kept extreme remedies for extreme cases.

When it came to the “non-naturals,” as he would sometimes call them, after the old physicians,—namely, air, meat and drink, sleep and watching, motion and rest, the retentions and excretions, and the affections of the mind,—he was, as I have said, of the school of sensible practitioners, in distinction from that vast community of quacks, with or without the diploma, who think the chief end of man is to support apothecaries, and are never easy until they can get every patient upon a regular course of something nasty or noxious. Nobody was so precise in his directions

about diet, air and exercise, as Dr. Jackson. He had the same dislike to the *à peu près*, the about so much, about so often, about so long, which I afterwards found among the punctilious adherents of the numerical system at La Pitié.

He used to insist on one small point with a certain philological precision, namely, the true meaning of the word "cure." He would have it that to *cure* a patient was simply to *care* for him. I refer to it as showing what his idea was of the relation of the physician to the patient. It was indeed to care for him, as if his life was bound up in him, to watch his incomings and outgoings, to stand guard at every avenue that disease might enter, to leave nothing to chance; not merely to throw a few pills and powders into one pan of the scales of Fate, while Death the skeleton was seated in the other, but to lean with his whole weight on the side of life, and shift the balance in its favor if it lay in human power to do it. Such devotion as this is only to be looked for in the man who gives himself wholly up to the business of healing, who considers Medicine itself a Science, or if not a science, is willing to follow it as an art,—the noblest of arts, which the gods and demigods of ancient religions did not disdain to practise and to teach.

The same zeal made him always ready to listen to any new suggestion which promised to be useful, at a period of life when many men find it hard to learn new methods and accept new doctrines. Few of his generation became so accomplished as he in the arts of direct exploration; coming straight from the Parisian experts, I have examined many patients

with him, and have had frequent opportunities of observing his skill in percussion and auscultation.

One element in his success, a trivial one compared with others, but not to be despised, was his punctuality. He always carried two watches,—I doubt if he told why, any more than Dr. Johnson told what he did with the orange-peel,—but probably with reference to this virtue. He was as much to be depended upon at the appointed time as the solstice or the equinox. There was another point I have heard him speak of as an important rule with him; to come at the hour when he was expected; if he had made his visit for several days successively at ten o'clock, for instance, not to put it off, if he could possibly help it, until eleven, and so keep a nervous patient and an anxious family waiting for him through a long, weary hour.

If I should attempt to characterize his teaching, I should say that while it conveyed the best results of his sagacious and extended observation, it was singularly modest, cautious, simple, sincere. Nothing was for show, for self-love; there was no rhetoric, no declamation, no triumphant “I told you so,” but the plain statement of a clear-headed honest man, who knows that he is handling one of the gravest subjects that interest humanity. His positive instructions were full of value, but the spirit in which he taught inspired that loyal love of truth which lies at the bottom of all real excellence.

I will not say that, during his long career, Dr. Jackson never made an enemy. I have heard him tell how, in his very early days, old Dr. Danforth got

into a towering passion with him about some professional consultation, and exploded a monosyllable or two of the more energetic kind on the occasion. I remember that that somewhat peculiar personage, Dr. Waterhouse, took it hardly when Dr. Jackson succeeded to his place as Professor of Theory and Practice. A young man of Dr. Jackson's talent and energy could hardly take the position that belonged to him without crowding somebody in a profession where three in a bed is the common rule of the household. But he was a peaceful man and a peacemaker all his days. No man ever did more, if so much, to produce and maintain the spirit of harmony for which we consider our medical community as somewhat exceptionally distinguished.

If this harmony should ever be threatened, I could wish that every impatient and irritable member of the profession would read that beautiful, that noble Preface to the "Letters," addressed to John Collins Warren. I know nothing finer in the medical literature of all time than this Prefatory Introduction. It is a golden prelude, fit to go with the three great Prefaces which challenge the admiration of scholars,—Calvin's to his *Institutes*, De Thou's to his *History*, and Casaubon's to his *Polybius*,—not because of any learning or rhetoric, though it is charmingly written, but for a spirit flowing through it to which learning and rhetoric are but as the breath that is wasted on the air to the blood that warms the heart.

Of a similar character is this short extract which I am permitted to make from a private letter of his to

a dear young friend. He was eighty-three years old at the time of writing it.

“ I have not loved every body whom I have known, but I have striven to see the good points in the characters of all men and women. At first I must have done this from something in my own nature, for I was not aware of it, and yet was doing it without any plan, when one day, sixty years ago, a friend whom I loved and respected said this to me, ‘ Ah, James, I see that you are destined to succeed in the world, and to make friends, because you are so ready to see the good points in the characters of those you meet.’ ”

I close this imperfect notice of some features in the character of this most honored and beloved of physicians by applying to him the words which were written of William Heberden, whose career was not unlike his own, and who lived to the same patriarchal age.

“ From his early youth he had always entertained a deep sense of religion, a consummate love of virtue, an ardent thirst after knowledge, and an earnest desire to promote the welfare and happiness of all mankind. By these qualities, accompanied with great sweetness of manners, he acquired the love and esteem of all good men, in a degree which perhaps very few have experienced; and after passing an active life with the uniform testimony of a good conscience, he became an eminent example of its influence, in the cheerfulness and serenity of his latest age.”

Such was the man whom I offer to you as a model, young gentlemen, at the outset of your medical career. I hope that many of you will recognize some traits of your own special teachers scattered through various parts of the land in the picture I have drawn. Let me assure you that whatever you may learn in this or any other course of public lectures,—and I trust you will learn a great deal,—the daily guidance, counsel, example, of your medical father, for such the Oath of Hippocrates tells you to consider your preceptor, will, if he is in any degree like him of whom I have spoken, be the foundation on which all that we teach is reared, and perhaps outlive most of our teachings, as in Dr. Jackson's memory the last lessons that remained with him were those of his Old Master.







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